

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Republican Party of Wisconsin

ADDRESS (number and street)

148 East Johnson Street

☐ Check if different than previously reported. (ACC)

Madison

WI

53703

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00074450

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☒ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mike Jones

Signature of Treasurer

Mike Jones

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 02 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 02 / 28 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		433731.94
(b) Cash on Hand at Beginning of Reporting Period.....	376171.13	
(c) Total Receipts (from Line 19) .....	171670.67	321949.79
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	547841.80	755681.73
7. Total Disbursements (from Line 31) .....	170704.73	378544.66
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	377137.07	377137.07
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Republican Party of Wisconsin

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y
02	/	01	/	2015

To:

M M M	/	D D D	/	Y Y Y Y Y
02	/	28	/	2015

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

16440.00

37765.00

(ii) Unitemized .....

131630.86

226780.75

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

148070.86

264545.75

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

8500.00

15000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

156570.86

279545.75

## 12. Transfers From Affiliated/Other

Party Committees.....

6100.00

12200.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

362.97

6758.52

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

8636.84

23445.52

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

8636.84

23445.52

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶

171670.67

321949.79

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

163033.83

298504.27

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	3659.99	9933.90
(ii) Non-Federal Share.....	6506.63	17660.25
(b) Other Federal Operating Expenditures .....	109478.40	227842.69
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	119645.02	255436.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	51059.71	123107.82
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	51059.71	123107.82
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	170704.73	378544.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	164198.10	360884.41

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	156570.86	279545.75
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	156570.86	279545.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	113138.39	237776.59
37. Offsets to Operating Expenditures (from Line 15, page 3).....	362.97	6758.52
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	112775.42	231018.07

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 67  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. LINDA CASSABAUM**

Mailing Address 1416 SW SUNRISE LN

City

ANKENY

State

IA

Zip Code

50023-7054

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2015

**Transaction ID : SA11.969175**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. LESTER FRANKENTHAL III**

Mailing Address 922 BARCLAY CIRCLE

City

LAKE FOREST

State

IL

Zip Code

60045-4211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2015

**Transaction ID : SA11.963092**

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARY NEWTON**

Mailing Address 607 E TAYLOR RUN PKWY

City

ALEXANDRIA

State

VA

Zip Code

22314-4929

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
02 / 02 / 2015

**Transaction ID : SA11.963091**

Amount of Each Receipt this Period

225.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

975.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 67  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CHARLES CHEEVER JR.**

Mailing Address 11112 MONMOUTH

City

SAN ANTONIO

State

TX

Zip Code

78239-3142

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	5

Transaction ID : SA11.962556

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. WALTER H. CLAIBORNE III**

Mailing Address 14217 CLAIBORNE ROAD

City

BATCHELOR

State

LA

Zip Code

70715-3514

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	5

Transaction ID : SA11.963089

Amount of Each Receipt this Period

225.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. KAREN M. GOLDSMITH**

Mailing Address 397 LAKEWOOD COURT

City

KOHLER

State

WI

Zip Code

53044-1335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	1	5

Transaction ID : SA11.968301

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

675.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. MICHAEL R. JAMESON**

Mailing Address E1117 ROUND LAKE DRIVE

City

WAUPACA

State

WI

Zip Code

54981-8389

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MIRAGE DEVELOPMENT

Occupation

FRANCHISE BRUKER/ CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2015

**Transaction ID : SA11.968449**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. REGINA MILLER**

Mailing Address 25 FULLER DRIVE

City

MADISON

State

WI

Zip Code

53704-5962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RMM

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY  
02 / 03 / 2015

**Transaction ID : SA11.968264**

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JAMES D. BELL**

Mailing Address 3900 W LEMONT BOULEVARD

City

MEQUON

State

WI

Zip Code

53092-5226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROBERT W BAIRD AND COMPANY

Occupation

INVESTMENT BNKING

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY  
02 / 06 / 2015

**Transaction ID : SA11.965529**

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

4800.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. KAREN M. GOLDSMITH**

Mailing Address 397 LAKEWOOD COURT

City

KOHLER

State

WI

Zip Code

53044-1335

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 06 / 2015

Transaction ID : SA11.965552

Amount of Each Receipt this Period

50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. KEITH R. MARDAK**

Mailing Address 2743 N LAKE DRIVE

City

MILWAUKEE

State

WI

Zip Code

53211-3851

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HAL LEONARD PUBLISHING CO

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

02 / 06 / 2015

Transaction ID : SA11.965530

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. A PETER ANTONY**

Mailing Address 7588 W HERON POND DRIVE

City

MEQUON

State

WI

Zip Code

53092-4393

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 12 / 2015

Transaction ID : SA11.965434

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 67

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. KATHERINE ASPENSON**

Mailing Address 351 MASON STREET NW APT 316

City State Zip Code  
 ONALASKA WI 54650-7044

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

02 / 17 / 2015

Transaction ID : SA11.966065

Amount of Each Receipt this Period

210.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. MR. MICHAEL BOWEN**

Mailing Address 6412 N BERKELEY BOULEVARD

City State Zip Code  
 FOX POINT WI 53217-4226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FOLEY AND LARDNER, LLP

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 17 / 2015

Transaction ID : SA11.966686

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. EDWARD J. HUYCKE**

Mailing Address 3208 ROCK HOLLOW ROAD

City State Zip Code  
 OKLAHOMA CITY OK 73120-1928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

02 / 18 / 2015

Transaction ID : SA11.966488

Amount of Each Receipt this Period

400.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

860.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 67

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. WILLIAM MCDEVITT**

Mailing Address W289 N3206 LOST CREEK COURT

City

PEWAUKEE

State

WI

Zip Code

53072-3301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8		2	0	1	5		

Transaction ID : SA11.966389

Amount of Each Receipt this Period

255.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. GORDON R. SCHAFER**

Mailing Address 5154 178TH ST

City

CHIPPEWA FALLS

State

WI

Zip Code

54729-6834

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GORDYS IGA-HARDWARE HANK

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	8		2	0	1	5		

Transaction ID : SA11.966381

Amount of Each Receipt this Period

150.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JUDITH ENGELS**

Mailing Address 4557 AMERICAN WAY

City

COTTAGE GROVE

State

WI

Zip Code

53527-9735

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CROSS RHODES STRATEGIES

Occupation

CONSULTING

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9		2	0	1	5		

Transaction ID : SA11.966679

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

655.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**

 Use separate schedule(s)  
 for each category of the  
 Detailed Summary Page

 FOR LINE NUMBER:  
 (check only one)

PAGE 12 OF 67

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RICHARD MEEUSEN**

Mailing Address W289N3414 LOST CREEK CT

City

PEWAUKEE

State

WI

Zip Code

53072-3302

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BADGER METER, INC.

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	1	5		

Transaction ID : SA11.969377

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MILTON E. NESHEK**

Mailing Address 1335 GENEVA NATIONAL AVENUE N

City

LAKE GENEVA

State

WI

Zip Code

53147-4831

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			1	9			2	0	1	5		

Transaction ID : SA11.965989

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. CONNIE HORSENS**

Mailing Address W1980 COUNTY ROAD C

City

CECIL

State

WI

Zip Code

54111-9365

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DAIRY FARMER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	5		

Transaction ID : SA11.969402

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

4250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 67  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. WILLIAM KLUG**

Mailing Address N2426 CHERRY RD

City  
RUBICON

State  
WI

Zip Code  
53078-9617

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 20 / 2015

Transaction ID : SA11.966209

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. THOMAS SCHAEZT**

Mailing Address 3265 S BITTERSWEET CIRCLE

City  
WEST BEND

State  
WI

Zip Code  
53095-8331

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ANSAY AND ASSOCIATES

Occupation

CHIEF OPERATING OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

02 / 20 / 2015

Transaction ID : SA11.966677

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. DOWE S. TILLEMA**

Mailing Address 606 17TH STREET

City  
MOSINEE

State  
WI

Zip Code  
54455-1031

FEC ID number of contributing  
federal political committee.

C

Name of Employer

EASTBAY INC.

Occupation

OPERATIONAL PROFESSIONAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 20 / 2015

Transaction ID : SA11.966166

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 67

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PETER B. CANNELL**

Mailing Address P.O. BOX 526

City

LOCUST VALLEY

State

NY

Zip Code

11560-0526

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PETER B CANNELL AND COMPANY, INC

Occupation

OWNER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2		2	3		2	0	1	5		

Transaction ID : SA11.967192

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. GERALDINE ENOCKSON**

Mailing Address 2908 TYLER PARKWAY

City

BISMARCK

State

ND

Zip Code

58503-0178

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2		2	3		2	0	1	5		

Transaction ID : SA11.966974

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. BETTY J. KORGER**

Mailing Address 3200 WATER ST LOT 2

City

STEVENS POINT

State

WI

Zip Code

54481-5256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	2		2	3		2	0	1	5		

Transaction ID : SA11.967559

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶

1200.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 67

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MR. SAMUEL E. PADDOCK**

Mailing Address 1870 SHERWOOD DRIVE SOUTHWEST

City	State	Zip Code
BELOIT	WI	53511-5658

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SA11.967575

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MARY FALL**

Mailing Address 4023 SUMMIT ROAD

City	State	Zip Code
ASHLAND	WI	54806-3544

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HOMEMAKER

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2015

Transaction ID : SA11.966943

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MARY NEWTON**

Mailing Address 607 E TAYLOR RUN PKWY

City	State	Zip Code
ALEXANDRIA	VA	22314-4929

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	24	/	2015

Transaction ID : SA11.967416

Amount of Each Receipt this Period

225.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

975.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 67

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BERNARD KUBALE**

Mailing Address P.O. BOX 544

City  
MERTONState  
WIZip Code  
53056-0544FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2015

Transaction ID : SA11.968425

Amount of Each Receipt this Period

250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. ROBERT WILSON**

Mailing Address P.O. BOX 9275

City  
PEORIAState  
ILZip Code  
61612-9275FEC ID number of contributing  
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 26 / 2015

Transaction ID : SA11.968534

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. JEFFREY C. PLIER**

Mailing Address 14 N HILL ROAD

City  
WAUSAUState  
WIZip Code  
54403-3671FEC ID number of contributing  
federal political committee.

C

Name of Employer

WAUSAU CONTAINER

Occupation

SALES MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 27 / 2015

Transaction ID : SA11.968186

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

16440.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

## **A. COCA-COLA COMPANY NONPARTISAN COMMITTEE FOR GOOD GOVERNMENT**

Mailing Address 1 COCA-COLA PLAZA NW

City State Zip Code  
 ATLANTA GA 30313-

FEC ID number of contributing  
federal political committee.

**C** C00012468

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**02** / **04** / **2015**

**Transaction ID : SA11.969569**

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. STATE AUTO EMPLOYEES PAC**

Mailing Address 518 E BROAD ST

City State Zip Code  
 COLUMBUS OH 43215-3901

FEC ID number of contributing  
federal political committee.

**C** C00430884

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**02** / **11** / **2015**

**Transaction ID : SA11.969572**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. INTEGRYS ENERGY GROUP PAC**

Mailing Address 130 E RANDOLPH ST

City State Zip Code  
 CHICAGO IL 60601-6207

FEC ID number of contributing  
federal political committee.

**C** C00442707

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**02** / **17** / **2015**

**Transaction ID : SA11.969568**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

8500.00

**TOTAL** This Period (last page this line number only)..... ►

8500.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 1ST ST SE

City  
WASHINGTONState  
DCZip Code  
20003-1885FEC ID number of contributing  
federal political committee.

C C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	2		2	0	1	5

Transaction ID : SA11.969567

Amount of Each Receipt this Period

6100.00

Transfer

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

6100.00

TOTAL This Period (last page this line number only)..... ►

6100.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 19 OF 67  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. CHARTER COMMUNICATIONS**

Mailing Address 135 SOUTH LASALLE STREET DEPT 8123

City	State	Zip Code
CHICAGO	IL	60674-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.72

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	11	/	2015

Transaction ID : SA11.969570

Amount of Each Receipt this Period

194.22

Reimbursement

Full Name (Last, First, Middle Initial)

**B. CHARTER COMMUNICATIONS**

Mailing Address 135 SOUTH LASALLE STREET DEPT 8123

City	State	Zip Code
CHICAGO	IL	60674-1072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

944.72

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
02	/	11	/	2015

Transaction ID : SA11.969571

Amount of Each Receipt this Period

168.75

Reimbursement

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

362.97

TOTAL This Period (last page this line number only)..... ►

362.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 67

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 02 2015

Transaction ID : SB21B.I21401

Amount of Each Disbursement this Period

113.87

Full Name (Last, First, Middle Initial)

**B. ISTREAM**

Mailing Address 13555 BISHOPS CT, STE 102

City State Zip Code  
BROOKFIELD WI 53005
Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 03 2015

Transaction ID : SB21B.I21391

Amount of Each Disbursement this Period

304.34

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 03 2015

Transaction ID : SB21B.I21402

Amount of Each Disbursement this Period

37.38

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

455.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 67

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PUSH DIGITAL**

Mailing Address P.O. BOX 7431

City COLUMBIA    State SC    Zip Code 29202

Purpose of Disbursement  
EMAIL SERVICES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02    03    2015

Transaction ID : SB21B.I21427

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address CREDIT CARD PROCESSING CENTER

City MILWAUKEE    State WI    Zip Code 53201

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02    04    2015

Transaction ID : SB21B.I21396

Amount of Each Disbursement this Period

829.04

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE    State WI    Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12    01    2014

Transaction ID : SB21B.I21470

Amount of Each Disbursement this Period

47.39

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3829.04

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. GLASS NICKEL PIZZA

Date of Disbursement

Transaction ID : SB21B.I21465

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

74.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## B. GLASS NICKEL PIZZA

Date of Disbursement

Transaction ID : SB21B.I21467

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

138.67

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

### C. OFFICE DEPOT

Date of Disbursement

Transaction ID : SB21B.I21466

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

280.67

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. THE GREAT DANE PUB**

Mailing Address 2980 CAHILL MAIN

City

FITCHBURG

State

WI

Zip Code

53711

Purpose of Disbursement

STAFF MEALS

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 07 2015

Transaction ID : SB21B.I21468

Amount of Each Disbursement this Period

233.17

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City

SAN FRANCISCO

State

CA

Zip Code

94105

Purpose of Disbursement

CREDIT CARD PROCESSING FEE

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 04 2015

Transaction ID : SB21B.I21403

Amount of Each Disbursement this Period

7.11

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK**

Mailing Address P.O. BOX 84047

City

COLUMBUS

State

GA

Zip Code

31908

Purpose of Disbursement

CREDIT CARD PAYMENT

Candidate Name

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 05 2015

Transaction ID : SB21B.I21394

Amount of Each Disbursement this Period

653.61

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

660.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 12 / 2015

Transaction ID : SB21B.I21452

Amount of Each Disbursement this Period

55.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. GLASS NICKEL PIZZA**

Mailing Address 2916 ATWOOD AVENUE

City MADISON      State WI      Zip Code 53704

Purpose of Disbursement  
MEETING EXPENSE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 / 05 / 2015

Transaction ID : SB21B.I21450

Amount of Each Disbursement this Period

187.97

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. GRANDSTAY OF MADISON**

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON      State WI      Zip Code 53718

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 10 / 2014

Transaction ID : SB21B.I21449

Amount of Each Disbursement this Period

160.30

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00





**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. AMERICAN LIBERTY GROUP**

Mailing Address 611 PENNSYLVANIA AVENUE SE

City WASHINGTON      State DC      Zip Code 20003

Purpose of Disbursement  
FUNDRAISING - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      06      2015

Transaction ID : SB21B.I21430

Amount of Each Disbursement this Period

7900.64

Full Name (Last, First, Middle Initial)

**B. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      06      2015

Transaction ID : SB21B.I21406

Amount of Each Disbursement this Period

3.23

Full Name (Last, First, Middle Initial)

**C. SOUTHWEST PUBLISHING & MAILING CORP**

Mailing Address 4000 SE ADAMS STREET

City TOPEKA      State KS      Zip Code 66609

Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      06      2015

Transaction ID : SB21B.I21423

Amount of Each Disbursement this Period

2016.67

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

9920.54

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BANCARD/FIS MERCHANT SERVICES**

Mailing Address 11000 W LAKE PARK DRIVE

City MILWAUKEE    State WI    Zip Code 53224

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2015

Transaction ID : SB21B.I21400

Amount of Each Disbursement this Period

558.78

**B. PIRYX**

Full Name (Last, First, Middle Initial)

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO    State CA    Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2015

Transaction ID : SB21B.I21407

Amount of Each Disbursement this Period

4.34

**C. PIRYX**

Full Name (Last, First, Middle Initial)

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO    State CA    Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 10 / 2015

Transaction ID : SB21B.I21408

Amount of Each Disbursement this Period

15.49

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

578.61



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2015

Transaction ID : SB21B.I21389

Amount of Each Disbursement this Period

143.14

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2015

Transaction ID : SB21B.I21390

Amount of Each Disbursement this Period

12.00

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City SAN FRANCISCO      State CA      Zip Code 94105

Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 / 12 / 2015

Transaction ID : SB21B.I21409

Amount of Each Disbursement this Period

2.15

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

157.29

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. PIRYX

Category/  
Type

8.82

State:  District:

## B. PIRYX

MM / DD / YYYY  
02 / 13 / 2015

Category/  
Type

29.00

State:  District:

### C. PUSH DIGITAL

Category/  
Type

2300.25

State:  District:

2338.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 17 2015

Transaction ID : SB21B.I21412

Amount of Each Disbursement this Period

12.71

Full Name (Last, First, Middle Initial)

**B. PINNACLE LIST COMPANY**

Mailing Address 2800 SHIRLINGTON ROAD

City State Zip Code  
ARLINGTON VA 22206
Purpose of Disbursement  
DIRECT MAIL - NOT FEA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 18 2015

Transaction ID : SB21B.I21422

Amount of Each Disbursement this Period

842.87

Full Name (Last, First, Middle Initial)

**C. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 18 2015

Transaction ID : SB21B.I21413

Amount of Each Disbursement this Period

8.83

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

864.41

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

**A. SOUTHWEST PUBLISHING & MAILING CORP**

Date of Disbursement

Transaction ID : SB21B.I21424

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Amount of Each Disbursement this Period

25077.74

## B. STEVE BROWN DIRECT MAIL

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.I21426

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

9285.24

Full Name (Last, First, Middle Initial)  
C. WILAND DIRECT INC.

Date of Disbursement



Transaction ID : SB21B.I21442

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Amount of Each Disbursement this Period

465.00

**SUBTOTAL** of Disbursements This Page (optional).....

34827.98

**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. PIRYX**

Mailing Address 85 NATOMA STREET

City State Zip Code  
SAN FRANCISCO CA 94105
Purpose of Disbursement  
CREDIT CARD PROCESSING FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 19 2015

Transaction ID : SB21B.I21414

Amount of Each Disbursement this Period

142.12

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address P.O. BOX 84047

City State Zip Code  
COLUMBUS GA 31908
Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02 20 2015

Transaction ID : SB21B.I21395

Amount of Each Disbursement this Period

1406.27

Full Name (Last, First, Middle Initial)

**C. BMO HARRIS BANK**

Mailing Address 770 N WATER STREET

City State Zip Code  
MILWAUKEE WI 53201
Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01 28 2015

Transaction ID : SB21B.I21461

Amount of Each Disbursement this Period

19.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1548.39



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. GRANDSTAY OF MADISON**

Mailing Address 5317 HIGH CROSSING BOULEVARD

City MADISON      State WI      Zip Code 53718

Purpose of Disbursement  
STAFF LODGING

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
01      23      2015

Transaction ID : SB21B.I21460

Amount of Each Disbursement this Period

320.60

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. BMO HARRIS BANK**

Mailing Address CREDIT CARD PROCESSING CENTER

City MILWAUKEE      State WI      Zip Code 53201

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      20      2015

Transaction ID : SB21B.I21397

Amount of Each Disbursement this Period

1773.36

Full Name (Last, First, Middle Initial)

**C. SAFESoft SOLUTIONS**

Mailing Address 20950 WARNER CENTER LANE

City WOODLAND      State CA      Zip Code 91367

Purpose of Disbursement  
PREDICTIVE DIALER

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      03      2015

Transaction ID : SB21B.I21475

Amount of Each Disbursement this Period

1530.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1773.36

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

902.50

State:  District:

MM / DD / YYYY

369.61

State:  District:

MM / DD / YYYY

379.00

State:  District:

1651.11

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. MILWAUKEE JOURNAL SENTINEL

Date of Disbursement

Transaction ID : SB21B.I21441

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Amount of Each Disbursement this Period

321.73

## B. PIRYX

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.I21415

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

### C. PITNEY BOWES CREDIT CORPORATION

Transaction ID : SB21B.I21437

Amount of Each Disbursement this Period

A diagram of a rectangular frame structure. The frame consists of four vertical members and four horizontal members. The joints are labeled as follows: 1 is at the top-left corner, 2 is at the top-right corner, 3 is at the bottom-right corner, and 4 is at the bottom-left corner.

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

418.39

**TOTAL** This Period (last page this line number only).....

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

## A. STRATEGIC FUNDRAISING

Category/  
Type

14049.00

State:  District:

## B. WEST BEND MUTUAL

MM / DD / YYYY

Category/  
Type

8893.57

State:  District:

### C. PIRYX

Category/  
Type

2.58

State:  District:

22945.15

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. PIRYX

Category/  
Type

2.13

State:  District:

**B. WISC DEPT OF REVENUE - SLS TX**

MM / DD / YYYY

Candidate Name	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67	68	69	70	71	72	73	74	75	76	77	78	79	80	81	82	83	84	85	86	87	88	89	90	91	92	93	94	95	96	97	98	99	100	

Category/  
Type

687.90

State:  District:

### C. AMERICAN LIBERTY GROUP

Candidate Name

Category/  
Type

360.00

State:  District:

1050.03

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. PIRYX

Category/  
Type

35.58

State:  District:

## B. PUSH DIGITAL

M M / D D / Y Y Y Y  
02 25 2015

Category/  
Type

3000.00

State:  District:

### C. AMERICAN LIBERTY GROUP

Category/  
Type

1140.00

State:  District:

4175.58



<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Republican Party of Wisconsin

### A. PIRYX

Date of Disbursement

Mailing Address 85 NATOMA STREET

City	State	Zip Code
SAN FRANCISCO	CA	94105

Transaction ID : SB21B.I21419

Purpose of Disbursement	CREDIT CARD PROCESSING FEE
-------------------------	----------------------------

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle Initial)

## B. PIRYX

Date of Disbursement

Mailing Address 85 NATOMA STREET

MM / DD / YYYY

City	State	Zip Code
SAN FRANCISCO	CA	94105

Transaction ID : SB21B.I21420

Purpose of Disbursement	CREDIT CARD PROCESSING FEE
-------------------------	----------------------------

Amount of Each Disbursement this Period

Candidate Name	
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
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21	21
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82	82
83	83
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85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle Initial)

C. SOUTHWEST PUBLISHING &amp; MAILING CORP

Date of Disbursement

Mailing Address 4000 SE ADAMS STREET

M M / D D / Y Y Y Y  
02 27 2015

City	State	Zip Code
TOPEKA	KS	66609

Transaction ID : SB21B.I21425

Purpose of Disbursement	DIRECT MAIL - NOT FEA
-------------------------	-----------------------

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

12270.75

**TOTAL** This Period (last page this line number only).....

109373.32

<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

Republican Party of Wisconsin

### A. DANIEL BORKHUS

City	State	Zip Code
MADISON	WI	53703

Transaction ID : SB30B.I21349

376.70

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

Full Name (Last, First, Middle)  
**B. ZACHARY BROWN**

M M / D D / Y Y Y Y  
02 13 2015

City	State	Zip Code
VERONA	WI	53593

Transaction ID : SB30B.I21351

Percentage

185.28

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Full Name (Last, First, Middle)  
C. RICHARD DICKIE

City	State	Zip Code
MADISON	WI	53703

Transaction ID : SB30B.I21353

1243.17

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

1805.15

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JOSEPH FADNESS**

Mailing Address 9506 S RYAN GREEN CT

City  
FRANKLINState  
WIZip Code  
53132-2237Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21355

Amount of Each Disbursement this Period

2835.73
---------

Full Name (Last, First, Middle Initial)

**B. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City  
MADISONState  
WIZip Code  
53704Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21357

Amount of Each Disbursement this Period

756.97
--------

Full Name (Last, First, Middle Initial)

**C. BEN GILES**

Mailing Address 1510 TRIPP CIRCLE

City  
MADISONState  
WIZip Code  
53706Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21359

Amount of Each Disbursement this Period

291.80
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3884.50
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City	State	Zip Code
SUAMICO	WI	54313

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21361

Amount of Each Disbursement this Period

1315.48
---------

Full Name (Last, First, Middle Initial)

**B. AMY HASENBERG**

Mailing Address 217 S MILLS STREET

City	State	Zip Code
MADISON	WI	53715

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21363

Amount of Each Disbursement this Period

133.10
--------

Full Name (Last, First, Middle Initial)

**C. BENJAMIN HEATH**

Mailing Address 3301 OAK KNOLL DRIVE

City	State	Zip Code
EAU CLAIRE	WI	54701

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21365

Amount of Each Disbursement this Period

1263.65
---------

SUBTOTAL of Disbursements This Page (optional).....▶

2712.23
---------

TOTAL This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. DONNA HEIMBACH**

Mailing Address 3002 DIANNE DRIVE

City  
MIDDLETONState  
WIZip Code  
53562-2425Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21367

Amount of Each Disbursement this Period

833.85
--------

Full Name (Last, First, Middle Initial)

**B. JOSEF LEVERATTO**

Mailing Address 16011 VIA SOLA

City  
LAKE ELSINAREState  
CAZip Code  
92530Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21369

Amount of Each Disbursement this Period

1494.68
---------

Full Name (Last, First, Middle Initial)

**C. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City  
BELOITState  
WIZip Code  
53511Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21371

Amount of Each Disbursement this Period

559.45
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2887.98
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ALEXANDER MANDRY**

Mailing Address 513 LEWIS STREET

City  
BURLINGTOState  
WIZip Code  
53105Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21373

Amount of Each Disbursement this Period

376.81
--------

Full Name (Last, First, Middle Initial)

**B. CHRISTOPHER MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City  
WAUKESHAState  
WIZip Code  
53186Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21375

Amount of Each Disbursement this Period

1530.68
---------

Full Name (Last, First, Middle Initial)

**C. HANNAH O' CONNOR**

Mailing Address 2200 MEADOW GREEN

City  
STOUGHTONState  
WIZip Code  
53589Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21377

Amount of Each Disbursement this Period

944.70
--------

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2852.19
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. RAMON ORTIZ**

Mailing Address 5110 CAMDEN ROAD

City MADISON	State WI	Zip Code 53716
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21379

Amount of Each Disbursement this Period

222.80
--------

Full Name (Last, First, Middle Initial)

**B. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City MIDDLETON	State WI	Zip Code 53562
-------------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21381

Amount of Each Disbursement this Period

1063.66
---------

Full Name (Last, First, Middle Initial)

**C. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City MAYLENE	State AL	Zip Code 35114
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21383

Amount of Each Disbursement this Period

1315.48
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

2601.94
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City  
MIDDLETONState  
WIZip Code  
53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

**Transaction ID : SB30B.I21385**

Amount of Each Disbursement this Period

198.45
--------

Full Name (Last, First, Middle Initial)

**B. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

**Transaction ID : SB30B.I21387**

Amount of Each Disbursement this Period

627.33
--------

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

**Transaction ID : SB30B.I21331**

Amount of Each Disbursement this Period

7248.96
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8074.74
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21332

Amount of Each Disbursement this Period

272.56
--------

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21333

Amount of Each Disbursement this Period

10.83
-------

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		13		2015

Transaction ID : SB30B.I21334

Amount of Each Disbursement this Period

75.79
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

359.18
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<input type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input checked="" type="checkbox"/>	30b

Republican Party of Wisconsin

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Category/  
Type

86.00

State:  District:

**B. ACCOUNTANTS WORLD PAYROLL LLC**

MM / DD / YYYY  
02 / 13 / 2015

Category/  
Type

45.00

State:  District:

### C. AMERICAN FUNDS SERVICE COMPANY

Category/  
Type

214.06

State:  District:

345.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. AMERICAN FUNDS SERVICE COMPANY**

Mailing Address BOX 6164

City  
INDIANAPOLISState  
INZip Code  
46206-6164Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2015

Transaction ID : SB30B.I21346

Amount of Each Disbursement this Period

187.13
--------

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SB30B.I21337

Amount of Each Disbursement this Period

273.00
--------

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City  
HAUPPAUGEState  
NYZip Code  
11788Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2015

Transaction ID : SB30B.I21344

Amount of Each Disbursement this Period

183.75
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

643.88
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. DANIEL BORKHUS**

Mailing Address 403 W DOTY STREET

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21350

Amount of Each Disbursement this Period

338.70
--------

Full Name (Last, First, Middle Initial)

**B. ZACHARY BROWN**

Mailing Address 10 TURNWOOD CIRCLE

City  
VERONAState  
WIZip Code  
53593Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21352

Amount of Each Disbursement this Period

196.01
--------

Full Name (Last, First, Middle Initial)

**C. RICHARD DICKIE**

Mailing Address 126 N. BLAIR ST. #1

City  
MADISONState  
WIZip Code  
53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21354

Amount of Each Disbursement this Period

1215.24
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1749.95
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	21b		22		23		24		25		26
	27		28a		28b		28c		29	<b>X</b>	30b

Republican Party of Wisconsin

### A. RICHARD DICKIE



City	State	Zip Code
MADISON	WI	53703

Transaction ID : SB30B.I21443

103.00

Category/  
Type

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State:  District:

## B. GLASS NICKEL PIZZA

MM / DD / YYYY

City	State	Zip Code
MADISON	WI	53704

Transaction ID : SB30B.I21446

Age Group	Percentage
18-24	10.00
25-34	15.00
35-44	20.00
45-54	25.00
55-64	30.00
65-74	35.00
75-84	40.00
85+	53.00

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

### C. JOSEPH FADNESS



City	State	Zip Code
FRANKLIN	WI	53132-2237

Transaction ID : SB30B.I21356

2835.73

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

2938.73

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JOHN FOSTER**

Mailing Address 2416 E WASHINGTON AVENUE

City MADISON	State WI	Zip Code 53704
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21358

Amount of Each Disbursement this Period

709.11
--------

Full Name (Last, First, Middle Initial)

**B. BEN GILES**

Mailing Address 1510 TRIPP CIRCLE

City MADISON	State WI	Zip Code 53706
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21360

Amount of Each Disbursement this Period

216.56
--------

Full Name (Last, First, Middle Initial)

**C. MARTHA GRAVLEE**

Mailing Address 2907 BIG TIMBER CIRCLE

City SUAMICO	State WI	Zip Code 54313
-----------------	-------------	-------------------

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21362

Amount of Each Disbursement this Period

1315.48
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2241.15
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. AMY HASENBERG**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address 217 S MILLS STREET

City	State	Zip Code
MADISON	WI	53715

**Transaction ID : SB30B.I21364**Purpose of Disbursement  
PAYROLL

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
235.38

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. BENJAMIN HEATH**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address 3301 OAK KNOLL DRIVE

City	State	Zip Code
EAU CLAIRE	WI	54701

**Transaction ID : SB30B.I21366**Purpose of Disbursement  
PAYROLL

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
1263.65

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. DONNA HEIMBACH**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address 3002 DIANNE DRIVE

City	State	Zip Code
MIDDLETON	WI	53562-2425

**Transaction ID : SB30B.I21368**Purpose of Disbursement  
PAYROLL

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
575.15

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2074.18

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. JOSEF LEVERATTO**

Mailing Address 16011 VIA SOLA

City	State	Zip Code
LAKE ELSINARE	CA	92530

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SB30B.I21370

Amount of Each Disbursement this Period

2090.89
---------

Full Name (Last, First, Middle Initial)

**B. LARRY LOOMIS**

Mailing Address 762 BRIAR LN

City	State	Zip Code
BELOIT	WI	53511

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SB30B.I21372

Amount of Each Disbursement this Period

548.43
--------

Full Name (Last, First, Middle Initial)

**C. ALEXANDER MANDRY**

Mailing Address 513 LEWIS STREET

City	State	Zip Code
BURLINGTO	WI	53105

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SB30B.I21374

Amount of Each Disbursement this Period

347.12
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2986.44
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Republican Party of Wisconsin**

Full Name (Last, First, Middle Initial)

**A. CHRISTOPHER MARTIN**

Mailing Address 100 CORRINA BOULEVARD

City  
WAUKESHAState  
WIZip Code  
53186Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

**Transaction ID : SB30B.I21376**

Amount of Each Disbursement this Period

1530.66
---------

Full Name (Last, First, Middle Initial)

**B. HANNAH O' CONNOR**

Mailing Address 2200 MEADOW GREEN

City  
STOUGHTONState  
WIZip Code  
53589Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

**Transaction ID : SB30B.I21378**

Amount of Each Disbursement this Period

679.91
--------

Full Name (Last, First, Middle Initial)

**C. RAMON ORTIZ**

Mailing Address 5110 CAMDEN ROAD

City  
MADISONState  
WIZip Code  
53716Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

**Transaction ID : SB30B.I21380**

Amount of Each Disbursement this Period

253.30
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2463.87
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. SCOTT POOLE**

Mailing Address 1528 SELLERY STREET

City  
MIDDLETONState  
WIZip Code  
53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21382

Amount of Each Disbursement this Period

633.04
--------

Full Name (Last, First, Middle Initial)

**B. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City  
MAYLENEState  
ALZip Code  
35114Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21384

Amount of Each Disbursement this Period

1315.48
---------

Full Name (Last, First, Middle Initial)

**C. JAMES SAPP**

Mailing Address 134 FALLING WATERS LANE

City  
MAYLENEState  
ALZip Code  
35114Purpose of Disbursement  
EXPENSE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21445

Amount of Each Disbursement this Period

43.68
-------

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1992.20
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. MILEAGE**

Mailing Address

City State Zip Code

Purpose of Disbursement  
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21448

Amount of Each Disbursement this Period

43.68
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CARL STOLTE**

Mailing Address 3519 ROMA LANE

City State Zip Code  
MIDDLETON WI 53562Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21386

Amount of Each Disbursement this Period

189.03
--------

Full Name (Last, First, Middle Initial)

**C. JOSHUA WILSON**

Mailing Address 641 W. MAIN STREET

City State Zip Code  
MADISON WI 53703Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Transaction ID : SB30B.I21388

Amount of Each Disbursement this Period

496.91
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SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

685.94
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SB30B.I21338

Amount of Each Disbursement this Period

6068.75
---------

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SB30B.I21339

Amount of Each Disbursement this Period

227.80
--------

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Purpose of Disbursement  
PAYROLL TAX

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2015

Transaction ID : SB30B.I21340

Amount of Each Disbursement this Period

10.83
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

6307.38
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I21341

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

71.38
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I21342

Purpose of Disbursement  
PAYROLL PROCESSING FEE

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

86.00
-------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. ACCOUNTANTS WORLD PAYROLL LLC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address 140 FELL COURT

City	State	Zip Code
HAUPPAUGE	NY	11788

Transaction ID : SB30B.I21343

Purpose of Disbursement  
PAYROLL TAX

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1058.12
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶

1215.50
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TOTAL This Period (last page this line number only).....▶

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 67

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Full Name (Last, First, Middle Initial)

**A. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
Type

Transaction ID : SB30B.I21347

Amount of Each Disbursement this Period

149.52
--------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**B. AMERICAN FUNDS SERVICE COMPANY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2015

Mailing Address BOX 6164

City	State	Zip Code
INDIANAPOLIS	IN	46206-6164

Purpose of Disbursement  
EMPLOYEE SIMPLE IRA

Candidate Name

Category/  
Type

Transaction ID : SB30B.I21348

Amount of Each Disbursement this Period

88.00
-------

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

--

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

237.52
51059.71

**SCHEDULE H1 (FEC Form 3X)****METHOD OF ALLOCATION FOR:**

- **ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)** (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

Transaction ID : MCW031715A

**USE ONLY ONE SECTION, A or B****A. State and Local Party Committees****Fixed Percentage (select one)**

\_\_\_\_\_ Presidential-Only Election Year (28% Federal)

☒ Presidential and Senate Election Year (36% Federal)

\_\_\_\_\_ Senate-Only Election Year (21% Federal)

\_\_\_\_\_ Non-Presidential and Non-Senate Election Year (15% Federal)

**B. Separate Segregated Funds and Nonconnected Committees****Flat Minimum Federal Percentage**

If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐

**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal.....  %Nonfederal .....  %

This ratio applies to (check all that apply):

Administrative ☐      Generic Voter Drive ☐      Public Communications Referencing Party Only ☐

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 64 OF 67

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 Republican Party of Wisconsin

NAME OF ACCOUNT  
 Republican Party - State Account

DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
 02 / 20 / 2015

TOTAL AMOUNT TRANSFERRED

8636.84

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

8636.84

Transaction ID : 031715M

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

8636.84

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

8636.84



**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 65 OF 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Advanced Disposal</b>		<b>Transaction ID : A031715M</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 74008053					
City Chicago	State IL	Zip Code 60674			
Purpose of Disbursement: Waste Removal		Category/ Type		Allocated Activity or Event Year-To-Date 17635.74	
Activity or Event Identifier:				Date MM / DD / YYYY 02 / 20 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
74.96			133.25		208.21

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Best Buds LLC</b>		<b>Transaction ID : B031715B</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 348 Woodland Circle					
City Madison	State WI	Zip Code 53704			
Purpose of Disbursement: Snow Removal		Category/ Type		Allocated Activity or Event Year-To-Date 18525.74	
Activity or Event Identifier:				Date MM / DD / YYYY 02 / 20 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
320.40			569.60		890.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Century Springs Bottling Co</b>		<b>Transaction ID : C031715</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 275					
City Genesee Depot	State WI	Zip Code 53127			
Purpose of Disbursement: Bottled Water		Category/ Type		Allocated Activity or Event Year-To-Date 18551.74	
Activity or Event Identifier:				Date MM / DD / YYYY 02 / 20 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
9.36			16.64		26.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
404.72		719.49		1124.21

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 66 OF 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Coca Cola Enterprises</b>		<b>Transaction ID : D031715</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 2335 Paysphere Circle				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Chicago	State IL	Zip Code 60674		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office Soda		Category/ Type		Allocated Activity or Event Year-To-Date 18572.84	
Activity or Event Identifier:				Date MM / DD / YYYY 02 / 20 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
7.60			13.50		21.10

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Easy Permit Postage Pitney Bowes</b>		<b>Transaction ID : E031715</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 371874				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Pittsburgh	State PA	Zip Code 15250		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Postage for Meter		Category/ Type		Allocated Activity or Event Year-To-Date 24419.90	
Activity or Event Identifier:				Date MM / DD / YYYY 02 / 20 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
2104.94			3742.12		5847.06

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Konica Minolta Premier Finance</b>		<b>Transaction ID : F031715</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 740423				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Atlanta	State GA	Zip Code 30374		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Copier Lease		Category/ Type		Allocated Activity or Event Year-To-Date 27025.78	
Activity or Event Identifier:				Date MM / DD / YYYY 02 / 20 / 2015	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
938.12			1667.76		2605.88

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3050.66		5423.38		8474.04

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 67 OF 67

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Republican Party of Wisconsin

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Pro One Janitorial</b>		<b>Transaction ID : G031715</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1101 Ashwaubenon St.				Allocated Activity or Event Year-To-Date 27525.78	
City Green Bay	State WI	Zip Code 54304		Date MM / DD / YYYY 02 / 20 / 2015	
Purpose of Disbursement: Custodial Services			Category/ Type		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
180.00			320.00		500.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Verizon Wireless</b>		<b>Transaction ID : H031715</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 25505				Allocated Activity or Event Year-To-Date 27594.15	
City Lehigh Valley	State PA	Zip Code 18002		Date MM / DD / YYYY 02 / 20 / 2015	
Purpose of Disbursement: Wireless Internet			Category/ Type		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.61			43.76		68.37

<b>C. Full Name (Last, First, Middle Initial)</b>				Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address				Allocated Activity or Event Year-To-Date	
City	State	Zip Code		Date MM / DD / YYYY	
Purpose of Disbursement:			Category/ Type		
Activity or Event Identifier:					
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
204.61		363.76		568.37

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
3659.99	6506.63	10166.62